



New Hampshire Fish and Game Department

HEADQUARTERS: 11 Hazen Drive, Concord, NH 03301-6500
(603) 271-3421
FAX (603) 271-5829

www.WildNH.com

e-mail: info@wildlife.nh.gov

DD Access: Relay NH 1-800-735-2964

*10/26/15
received
sf*

CERTIFIED MAIL-RETURN RECIEPT REQUESTED

October 20, 2015

US EPA
Office of Ecosystem Protection
ATTENTION: Shelly Puleo (OEPO6-1)
5 Post Office Square, Suite 100
Boston, Massachusetts 02114-2023

Re: NPDES Reapplication Powder Mill State Fish Hatchery- No. NH0000710 —

Dear Ms. Puleo:

Enclosed please find the application Form-1 General and Form-2B NPDES for this Aquatic Animal Production facility, one of six facilities the New Hampshire Fish and Game Department operates. We ask if you will consider these submitted forms as timely and complete for 40 CFR 122.6; 40 CFR 122.21 and consider the current permit valid under 40 CFR 122.6 in the interim. Thank you for your consideration.

Sincerely

Glenn Normandeau
Executive Director

CC: NHDES-Jeff Andrews

FORM 1 GENERAL	 EPA	U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program <i>(Read the "General Instructions" before starting.)</i>	I. EPA I.D. NUMBER F NH0000710
LABEL ITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION		NH0000710 - NH FISH & GAME DEPT POWDER MILL STATE FISH HATCHERY 11 HAZEN DRIVE CONCORD NH 03301 288 MERRYMEETING ROAD	
II. POLLUTANT CHARACTERISTICS		GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.	
INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms .			
SPECIFIC QUESTIONS		SPECIFIC QUESTIONS	
YES NO FORM ATTACHED A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		YES NO FORM ATTACHED B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	
III. NAME OF FACILITY			
1 SKIP Powder Mill State Fish Hatchery			
IV. FACILITY CONTACT			
A. NAME & TITLE (last, first, & title)		B. PHONE (area code & no.)	
2 Thomas Givetz, Hatchery Superintendent		(603) 859-2041	
V. FACILITY MAILING ADDRESS			
A. STREET OR P.O. BOX			
3 288 Merrymeeting Road			
B. CITY OR TOWN		C. STATE	D. ZIP CODE
4 New Durham		NH	03855
VI. FACILITY LOCATION			
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER			
5 288 Merrymeeting Road			
B. COUNTY NAME			
Strafford			
C. CITY OR TOWN		D. STATE	E. ZIP CODE
6 New Durham		NH	03855
		F. COUNTY CODE (if known)	

CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST				B. SECOND			
C	7	0921	(specify) Fish Hatchery & Preserves	C	7	N/A	(specify)
15	16	17	18	15	16	17	18
C. THIRD				D. FOURTH			
C	7	N/A	(specify)	C	7	N/A	(specify)
15	16	17	18	15	16	17	18

VIII. OPERATOR INFORMATION

A. NAME												B. Is the name listed in Item VIII-A also the owner?			
8 New Hampshire Fish and Game Department												<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
15 16 17 18 19 20 21 22 23 24 25 26												55 56			
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other," specify.)												D. PHONE (area code & no.)			
F = FEDERAL S = STATE P = PRIVATE M = PUBLIC (other than federal or state) O = OTHER (specify)												S (specify) A (603) 271-2501			
56												15 16 17 18 19 20 21 22 23 24 25 26			

E. STREET OR P.O. BOX																	
11 Hazen Drive																	
26 27 28 29 30 31 32 33 34 35 36 37																	
F. CITY OR TOWN												G. STATE		H. ZIP CODE		IX. INDIAN LAND	
B Concord												NH		03301		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15 16 17 18 19 20 21 22 23 24 25 26												40 41		42 43 44 45 46 47 48 49 50 51		52	

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)												D. PSD (Air Emissions from Proposed Sources)											
9 N NH0000710												9 P N/A											
15 16 17 18 19 20 21 22 23 24 25 26												30 31 32 33 34 35 36 37 38 39 40											
B. UIC (Underground Injection of Fluids)												E. OTHER (specify)											
9 U N/A												9 N/A (specify)											
15 16 17 18 19 20 21 22 23 24 25 26												30 31 32 33 34 35 36 37 38 39 40											
C. RCRA (Hazardous Wastes)												E. OTHER (specify)											
9 R N/A												9 N/A (specify)											
15 16 17 18 19 20 21 22 23 24 25 26												30 31 32 33 34 35 36 37 38 39 40											

XI. MAP

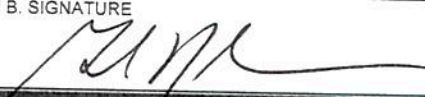
Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers, and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Conservation, fisheries management, fish culture facility raising trout for coldwater fisheries management and release of hatchery raised fish.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)		B. SIGNATURE		C. DATE SIGNED	
Glenn Normandeau, Executive Director				10/21/15	

COMMENTS FOR OFFICIAL USE ONLY

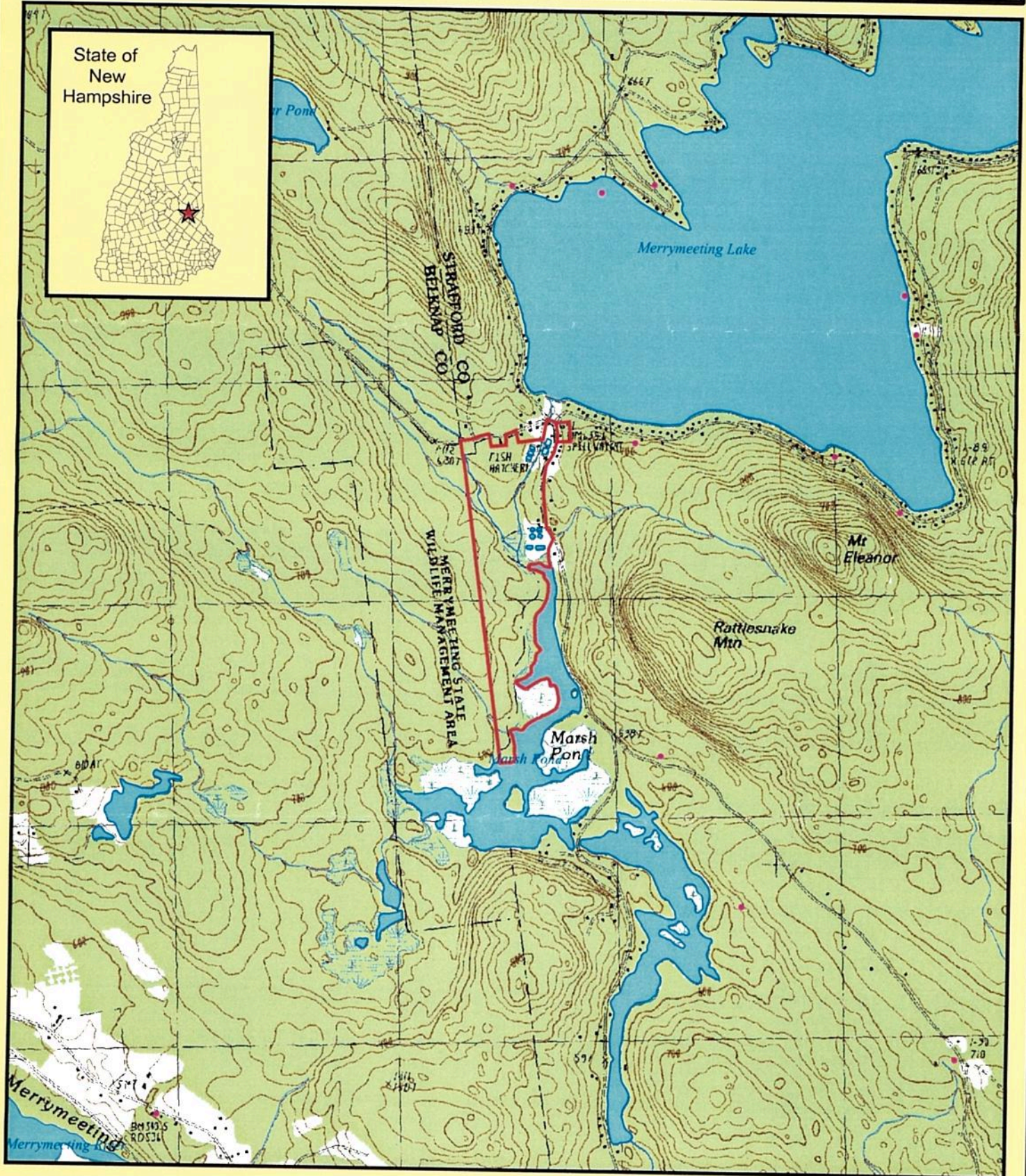
C	
15	16



Powder Mill Fish Hatchery, New Durham, N.H.

USGS Quad Name : Alton, NH

State of
New
Hampshire



See attached drawings for
additional detail of water source,
discharge, and water flow.

0.2 0.1 0 0.2 Miles

Legend:

- Known Well Locations from NHDES Data
- NHFG Fish Hatchery Boundary

Discharge Locations NHFG Powder Mill Fish Hatchery

 Hatchery boundary

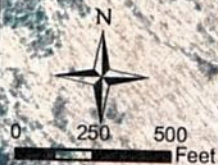
 Discharge/or Intake

Merrymeeting Lake

Intake
N 43.47947
W -71.17592

DIS 001
N 43.47418
W -71.18017

DIS 010
N 43.47112
W -71.18030



EPA I.D. NUMBER (copy from Item 1 of Form 1)
NH0000710

FORM
2B
NPDES

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATIONS FOR PERMIT TO DISCHARGE WASTEWATER
CONCENTRATED ANIMAL FEEDING OPERATIONS AND AQUATIC ANIMAL PRODUCTION FACILITIES

I. GENERAL INFORMATION

Applying for: Individual Permit ☒ Coverage Under General Permit ☐

A. TYPE OF BUSINESS	B. CONTACT INFORMATION	C. FACILITY OPERATION STATUS
<input type="checkbox"/> 1. Concentrated Animal Feeding Operation (complete items B, C, D, and section II) <input checked="" type="checkbox"/> 2. Concentrated Aquatic Animal Production Facility (complete items B, C, and section III)	Owner/or Operator Name: <u>New Hampshire Fish and Game Dept.</u> Telephone: (<u>(603)</u> <u>271-2501</u>) Address: <u>11</u> <u>Hazen</u> <u>Drive</u> Facsimile: (<u>(603)</u> <u>271-5829</u>) City: <u>Concord</u> State: <u>NH</u> Zip Code: <u>03301</u>	<input checked="" type="checkbox"/> 1. Existing Facility <input type="checkbox"/> 2. Proposed Facility

D. FACILITY INFORMATION

Name: Powder Mill State Fish Hatchery Telephone: ((603) 859-2041)
 Address: 288 Merrymeeting Road Facsimile: (N/A)
 City: New Durham State: New Hampshire Zip Code: 03855
 County: Strafford Latitude: 43°28'27.92" Longitude: 071°10'51.33"

If contract operation: Name of Integrator: N/A
 Address of Integrator: _____

II. CONCENTRATED ANIMAL FEEDING OPERATION CHARACTERISTICS

A. TYPE AND NUMBER OF ANIMALS			B. MANURE, LITTER, AND/OR WASTEWATER PRODUCTION AND USE
1. TYPE	2. ANIMALS		1. How much manure, litter, and wastewater is generated annually by the facility? _____ tons <u>26,400</u> gallons 2. If land applied how many acres of land under the control of the applicant are available for applying the CAFOs manure/litter/wastewater? <u>20</u> acres 3. How many tons of manure or litter, or gallons of wastewater produced by the CAFO will be transferred annually to other persons? _____ tons <u>26,400</u> gallons
	NO. IN OPEN CONFINEMENT	NO. HOUSED UNDER ROOF	
<input type="checkbox"/> Mature Dairy Cows			
<input type="checkbox"/> Dairy Heifers			
<input type="checkbox"/> Veal Calves			
<input type="checkbox"/> Cattle (not dairy or veal calves)			
<input type="checkbox"/> Swine (55 lbs. or over)			
<input type="checkbox"/> Swine (under 55 lbs.)			
<input type="checkbox"/> Horses			
<input type="checkbox"/> Sheep or Lambs			
<input type="checkbox"/> Turkeys			
<input type="checkbox"/> Chickens (Broilers)			
<input type="checkbox"/> Chickens (Layers)			
<input type="checkbox"/> Ducks			
<input checked="" type="checkbox"/> Other: Specify <u>Salmonid Fish</u>	<u>N/A</u>	<u>N/A</u>	
3. TOTAL ANIMALS			

C. ☒ TOPOGRAPHIC MAP

D. TYPE OF CONTAINMENT, STORAGE AND CAPACITY

1. Type of Containment

Total Capacity (in gallons)

☐ Lagoon

☐ Holding Pond

☐ Evaporation Pond

☒ Other: Specify Settling Ponds

27,000

2. Report the total number of acres contributing drainage: N/A acres

3. Type of Storage

Total Number of
Days

Total Capacity
(gallons/tons)

☐ Anaerobic Lagoon

☐ Storage Lagoon

☐ Evaporation Pond

☐ Aboveground Storage Tanks

☐ Belowground Storage Tanks

☐ Roofed Storage Shed

☐ Concrete Pad

☐ Impervious Soil Pad

☒ Other: Specify Settling Ponds

N/A

27,000

E. NUTRIENT MANAGEMENT PLAN

Note: Effective February 27, 2009, a permit application is not complete until a nutrient management plan is submitted to the Permitting Authority.

1. Please indicate whether a nutrient management plan has been included with this permit application. ☒ Yes ☐ No

2. If no, please explain:

3. Is a nutrient management plan being implemented for the facility? ☒ Yes ☐ No

4. The date of the last review or revision of the nutrient management plan. Date: January 2012

5. If not land applying, describe alternative use(s) of manure, litter, and/or wastewater: N/A

F. LAND APPLICATION BEST MANAGEMENT PRACTICES

Please check any of the following best management practices that are being implemented at the facility to control runoff and protect water quality:

☒ Buffers ☒ Setbacks ☐ Conservation tillage ☐ Constructed wetlands ☐ Infiltration field ☐ Grass filter ☐ Terrace

III. CONCENTRATED AQUATIC ANIMAL PRODUCTION FACILITY CHARACTERISTICS

A. For each outfall give the maximum daily flow, maximum 30-day flow, and the long-term average flow.

B. Indicate the total number of ponds, raceways, and similar structures in your facility.

1. Outfall No.	2. Flow (gallons per day)			1. Ponds 11	2. Raceways 97	3. Other 6 incubators
	a. Maximum Daily	b. Maximum 30 Day	c. Long Term Average	C. Provide the name of the receiving water and the source of water used by your facility.		
Dis 001	1.7 MGD	2.0 MGD	1.8 MGD			
Dis 002	4.6MGD	4.6MGD	4.3 MGD			

1. Receiving Water
Merrymeeting River

2. Water Source
Merrymeeting Lake

D. List the species of fish or aquatic animals held and fed at your facility. For each species, give the total weight produced by your facility per year in pounds of harvestable weight, and also give the maximum weight present at any one time.

1. Cold Water Species			2. Warm Water Species		
a. Species	b. Harvestable Weight (pounds)		a. Species	b. Harvestable Weight (pounds)	
	(1) Total Yearly	(2) Maximum		(1) Total Yearly	(2) Maximum
Eastern Brook Trout	130,000	265,000	N/A		
Rainbow Trout	97,000	combined			
Brown Trout	32,000				
Landlocked salmon	6,000				
E. Report the total pounds of food during the calendar month of maximum feeding.			1. Month September	2. Pounds of Food 19,000	

IV. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. Name and Official Title (print or type)
Glenn Normandeau, Executive Director

B. Telephone (603) 271-2501

C. Signature

D. Date Signed

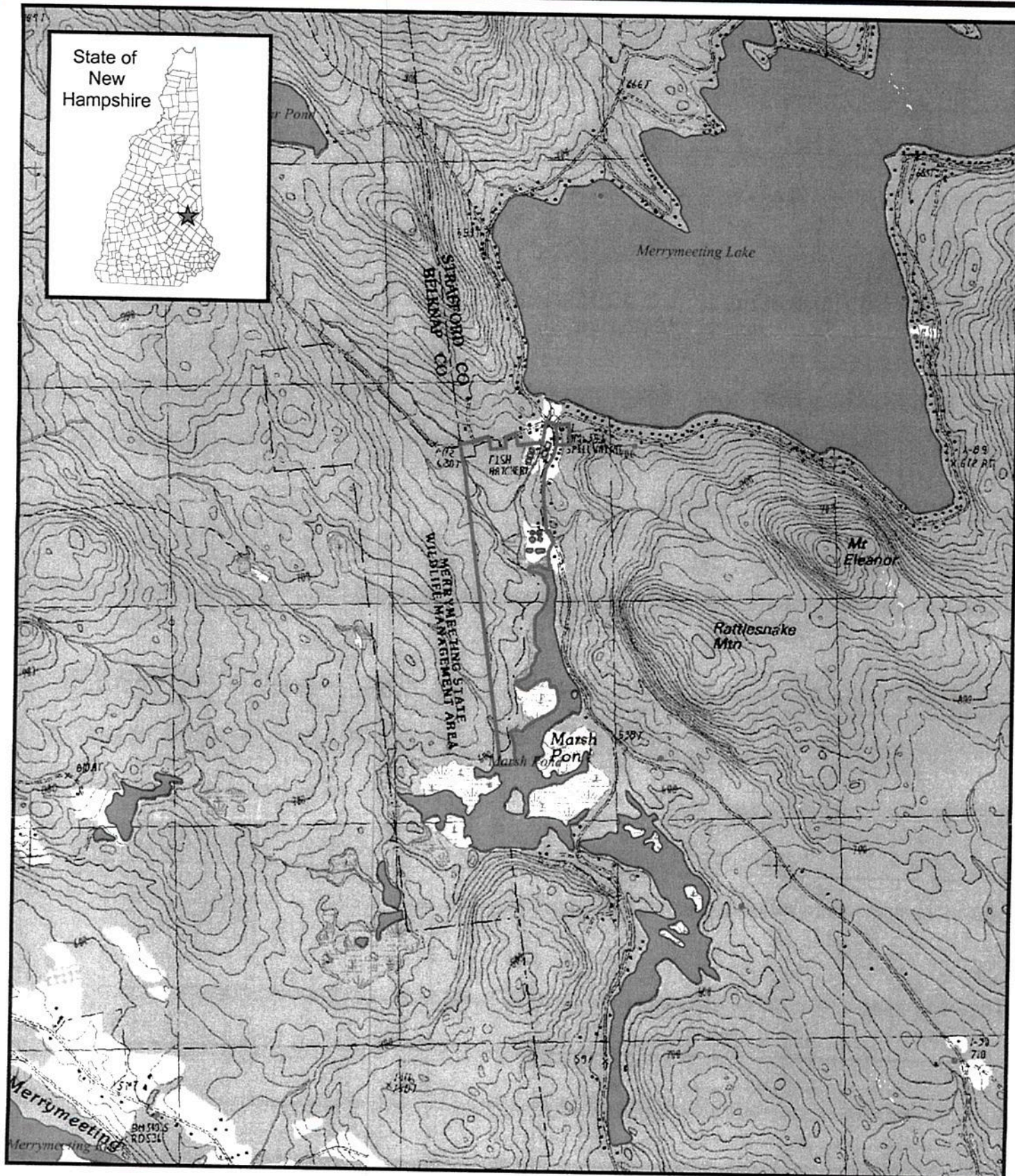
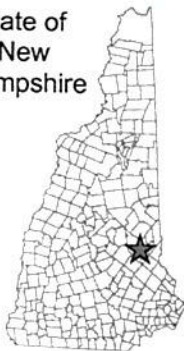
10/21/15



Powder Mill Fish Hatchery, New Durham, N.H.

USGS Quad Name : Alton, NH

State of
New
Hampshire



See attached drawings for
additional detail of water source,
discharge, and water flow.


0.2 0.1 0 0.2 Miles

Legend:

- Known Well Locations from NHDES Data
- NHFG Fish Hatchery Boundary

**Discharge Locations
NHFG Powder Mill
Fish Hatchery**

 Hatchery boundary

 Discharge/or Intake

Merrymeeting Lake

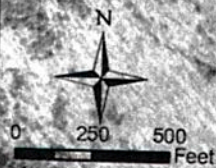
Intake
N 43.47947
W -71.17592

DIS 001
N 43.47418
W -71.18017

DIS 010
N 43.47112
W -71.18030

Southeast Rd

Merrymeeting Rd





New Hampshire Fish and Game Department

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DD Access: Relay NH 1-800-735-2964

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CERTIFIED MAIL-RETURN RECEIPT REQUESTED

October 20, 2015

US EPA
Office of Ecosystem Protection
ATTENTION: Shelly Puleo (OEPO6-1)
5 Post Office Square, Suite 100
Boston, Massachusetts 02114-2023

Re: NPDES Reapplication Powder Mill State Fish Hatchery- No. NH0000710 —

Dear Ms. Puleo:


Enclosed please find the application Form-1 General and Form-2B NPDES for this Aquatic Animal Production facility, one of six facilities the New Hampshire Fish and Game Department operates. We ask if you will consider these submitted forms as timely and complete for 40 CFR 122.6; 40 CFR 122.21 and consider the current permit valid under 40 CFR 122.6 in the interim. Thank you for your consideration.

Sincerely

A handwritten signature in black ink, appearing to read "GN", written over a horizontal line.

Glenn Normandeau
Executive Director

CC: NHDES-Jeff Andrews

FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program <i>(Read the "General Instructions" before starting.)</i>	I. EPA I.D. NUMBER NH0000710
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LABEL ITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION	NH0000710 - NH FISH & GAME DEPT POWDER MILL STATE FISH HATCHERY 11 HAZEN DRIVE CONCORD NH 03301 288 MERRYMEETING ROAD	GENERAL INSTRUCTIONS If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.
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II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of **bold-faced terms**.

SPECIFIC QUESTIONS	Mark "X"			SPECIFIC QUESTIONS	Mark "X"		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)	X		X
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		X		F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

C	1	SKIP	Powder Mill State Fish Hatchery
---	---	------	---------------------------------

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)		B. PHONE (area code & no.)	
C	2	Thomas Givetz, Hatchery Superintendent	(603) 859-2041

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX		B. CITY OR TOWN		C. STATE	D. ZIP CODE
C	3	288 Merrymeeting Road	New Durham	NH	03855

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A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER		B. COUNTY NAME		C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
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CONTINUED FROM THE FRONT

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND										
C	7	0	9	2	1	(specify) Fish Hatchery & Preserves	C	7	N/A	(specify)										
15	16	17	18	19		15	16	17	18	19										
C. THIRD										D. FOURTH										
C	7	N/A	(specify)							C	7	N/A	(specify)							
15	16	17	18	19		15	16	17	18	19										

VIII. OPERATOR INFORMATION

A. NAME										B. Is the name listed in Item VIII-A also the owner?																			
C	8	New Hampshire Fish and Game Department										<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																	
15	16											55	56																
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										56										A (603) 271-2501									
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E. STREET OR P.O. BOX																			
11 Hazen Drive																			
26																			55

F. CITY OR TOWN										G. STATE		H. ZIP CODE		IX. INDIAN LAND	
C	B	Concord								NH		03301		Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
15	16	17	18	19	20	21	22	23	24	40	41	42	43	44	45

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C	9	N	NH0000710							C	9	P	N/A						
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B. UIC (Underground Injection of Fluids)										E. OTHER (specify)									
C	9	U	N/A							C	9		N/A (specify)						
15	16	17	18	19	20	21	22	23	24	30	31	32	33	34	35	36	37	38	39
C. RCRA (Hazardous Wastes)										E. OTHER (specify)									
C	9	R	N/A							C	9		N/A (specify)						
15	16	17	18	19	20	21	22	23	24	30	31	32	33	34	35	36	37	38	39

XI. MAP


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I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

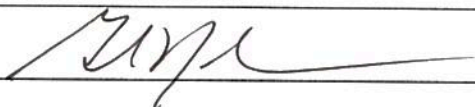
A. NAME & OFFICIAL TITLE (type or print)										B. SIGNATURE										C. DATE SIGNED									
Glenn Normandeau, Executive Director																				10/21/15									

COMMENTS FOR OFFICIAL USE ONLY

C																			55
C																			55

EPA Form 3510-2B (Rev. 11-08)

C. <input checked="" type="checkbox"/> TOPOGRAPHIC MAP			
D. TYPE OF CONTAINMENT, STORAGE AND CAPACITY			
1. Type of Containment	Total Capacity (in gallons)		
<input type="checkbox"/> Lagoon			
<input type="checkbox"/> Holding Pond			
<input type="checkbox"/> Evaporation Pond			
<input checked="" type="checkbox"/> Other: Specify <u>Settling Ponds</u>	27,000		
2. Report the total number of acres contributing drainage: <u>N/A</u> acres			
3. Type of Storage	Total Number of Days	Total Capacity (gallons/tons)	
<input type="checkbox"/> Anaerobic Lagoon			
<input type="checkbox"/> Storage Lagoon			
<input type="checkbox"/> Evaporation Pond			
<input type="checkbox"/> Aboveground Storage Tanks			
<input type="checkbox"/> Belowground Storage Tanks			
<input type="checkbox"/> Roofed Storage Shed			
<input type="checkbox"/> Concrete Pad			
<input type="checkbox"/> Impervious Soil Pad			
<input checked="" type="checkbox"/> Other: Specify <u>Settling Ponds</u>	N/A	27,000	
E. NUTRIENT MANAGEMENT PLAN			
<p>Note: Effective February 27, 2009, a permit application is not complete until a nutrient management plan is submitted to the Permitting Authority.</p> <p>1. Please indicate whether a nutrient management plan has been included with this permit application. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>2. If no, please explain:</p> <p>3. Is a nutrient management plan being implemented for the facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>4. The date of the last review or revision of the nutrient management plan. Date: <u>January 2012</u></p> <p>5. If not land applying, describe alternative use(s) of manure, litter, and/or wastewater: <u>N/A</u></p>			
F. LAND APPLICATION BEST MANAGEMENT PRACTICES			
<p>Please check any of the following best management practices that are being implemented at the facility to control runoff and protect water quality:</p> <p><input checked="" type="checkbox"/> Buffers <input checked="" type="checkbox"/> Setbacks <input type="checkbox"/> Conservation tillage <input type="checkbox"/> Constructed wetlands <input type="checkbox"/> Infiltration field <input type="checkbox"/> Grass filter <input type="checkbox"/> Terrace</p>			

III. CONCENTRATED AQUATIC ANIMAL PRODUCTION FACILITY CHARACTERISTICS						
A. For each outfall give the maximum daily flow, maximum 30-day flow, and the long-term average flow.				B. Indicate the total number of ponds, raceways, and similar structures in your facility.		
1. Outfall No.	2. Flow (gallons per day)			1. Ponds 11	2. Raceways 97	3. Other 6 incubators
	a. Maximum Daily	b. Maximum 30 Day	c. Long Term Average	C. Provide the name of the receiving water and the source of water used by your facility.		
Dis 001	1.7 MGD	2.0 MGD	1.8 MGD			
Dis 002	4.6MGD	4.6MGD	4.3 MGD			
				1. Receiving Water Merrymeeting River	2. Water Source Merrymeeting Lake	
D. List the species of fish or aquatic animals held and fed at your facility. For each species, give the total weight produced by your facility per year in pounds of harvestable weight, and also give the maximum weight present at any one time.						
1. Cold Water Species				2. Warm Water Species		
a. Species	b. Harvestable Weight (pounds)		a. Species	b. Harvestable Weight (pounds)		
	(1) Total Yearly	(2) Maximum		(1) Total Yearly	(2) Maximum	
Eastern Brook Trout	130,000	265,000	N/A			
Rainbow Trout	97,000	combined				
Brown Trout	32,000					
Landlocked salmon	6,000					
E. Report the total pounds of food during the calendar month of maximum feeding.				1. Month September	2. Pounds of Food 19,000	
IV. CERTIFICATION						
<i>I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information is true accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.</i>						
A. Name and Official Title (print or type) Glenn Normandeau, Executive Director				B. Telephone (603) 271-2501		
C. Signature 				D. Date Signed 10/21/15		